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# County Social Services Annual Report

December 1

# 2013

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This report contains the mental health and disability annual report completed on behalf of Allamakee, Black Hawk, Butler, Cerro Gordo, Chickasaw, Clayton, Fayette, Floyd, Grundy, Hancock, Howard, Humboldt, Kossuth, Mitchell, Pocahontas, Tama, Webster, Winnebago, Winneshiek, Worth and Wright Counties for the fiscal year beginning July 1, 2012 and ending June 30, 2013. This report was prepared by Bob Lincoln, Administrator and presented to the County Social Services Board on November 27, 2013 and submitted to the Iowa Department of Human Services on November 29, 2013.

Mental Health &  
Disability Plan

## Contents

County Social Services Fiscal Year 2013 Annual Review .....	2
Legal Reference 441-25.17(331) Management plan annual review. ....	2
1. Progress toward goals and objectives of the Strategic Plan .....	3
Goal 1 Service Coordination Program.....	3
Goal 2 Country View .....	4
Goal 3 Mitchell County Care Facility .....	5
Goal 4 Administrative Consolidation.....	7
Goal 5 Assessment Center/ Crisis Stabilization.....	8
Goal 6 Standardized Assessments & Utilization Management .....	9
Goal 7 IVRS Work Program.....	10
Goal 8 Toledo Service Coordination.....	10
2. Documentation of stakeholder involvement; .....	12
Website Launch .....	12
Stakeholder Meetings.....	12
County Board of Supervisors .....	12
County Social Services Governing Board Meeting .....	12
Positive Behavioral Support Intervention Committee .....	12
Mental Health Committee.....	12
Other Opportunities for Stakeholder Involvement.....	12
New County Social Services members have established advisory boards that continue to meet and provide input to the region.....	12
3. Current provider network;.....	13
4. Actual expenditures for the fiscal year 2013 .....	23
5. Scope of services provided through the fiscal year (do not include unused covered services);.....	25
6. Appeals, number, type, and resolution;.....	27
7. Quality assurance implementation, findings and impact on plan, outcomes as captured by each program; .....	27
Psychiatric Inpatient Analysis.....	27
State Mental Health Institutes .....	27
Expansion of County Social Services Covered Lives.....	28
Administrative Quality Reviews .....	28
Assessment of County Social Services use of Residential Facilities .....	28
Developing Multi-Occurring Competency .....	29
New Member Annual Reports .....	29
Community Reinvestment.....	29
8. Waiting list information .....	29

## County Social Services Fiscal Year 2013 Annual Review

County Social Services for this fiscal year constitutes the following counties with a population of 457,522:

Allamakee	Cerro Gordo	Fayette	Hancock	Kossuth	Tama	Winneshiek
Black Hawk	Chickasaw,	Floyd	Howard	Mitchell	Webster	Worth
Butler	Clayton	Grundy	Humboldt	Pocahontas	Winnebago	Wright

### **Legal Reference 441-25.17(331) Management plan annual review.**

The County Social Services Administrator shall prepare an annual review for the county stakeholders, the Department of Human Services and the state MHD Commission. By December 1st the annual review will be sent to the Department of Human Services for informational purposes.

The annual review shall incorporate an analysis of the data associated with the services managed by County Social Services during the preceding fiscal year. The annual review shall include, but not be limited to:

1. Progress toward goals and objectives of the Strategic Plan;
2. Documentation of stakeholder involvement;
3. Current provider network;
4. Actual expenditures;
5. Scope of services provided through the fiscal year (do not include unused covered services);
6. Appeals, number, type, and resolution;
7. Quality assurance implementation, findings and impact on plan, outcomes as captured by each program;
8. Waiting list information

# 1. Progress toward goals and objectives of the Strategic Plan

## Goal 1 Service Coordination Program

By July 1, 2010 have a fully implemented and operational Service Coordination program that will provide a help center for the coordination and dispatch of social services coverage to the community regardless of age or need. This program will also serve as the coordination point for mental health & disability services response to disasters.

### Action Steps

### Progress

1. Hire and train a Lead Service Coordinator with the primary focus of operating an effective help center, coordinating effective hospital discharge planning, and coordinate implementation of the new resource management program.(7/1/2009)	Financial concerns have left this position vacant. It will be reviewed again during this budget cycle. An attempt was made to integrate the Crisis Stabilization grant into this objective but was not supported by the grantor. <b>FY11:</b> We were ready to hire 10/2011 but stopped the process when Grundy and Tama indicated they wished to join County Social Services. We will review after the merger. <b>FY12:</b> Lead Service Coordinator has been identified for the newly formed region with weekly phone staffing.
2. Hire a Service Coordinator to work primarily in Mitchell and Butler Counties. (7/1/2009)	We are moving a Floyd County TCM into a Mitchell County Office and when a new Floyd County TCM is hired the moved case manager will assume this role. <b>FY11:</b> Still pending due to redesign uncertainty. <b>FY12:</b> This position was filled July 2012, the position covers Butler County and combines TCM functions. Mitchell County is now covered by our Chickasaw CPC partner.
3. Certify all Service Coordinators in Mental Health First Aide (1/1/2010)	5 Service Coordinators have completed the course 3 are left. <b>FY11: Done</b>
4. Certify all Service Coordinators in Crisis Prevention.	All have had at least the 8 hour CPI course. <b>FY11:</b> Waiting to coordinate with CV training schedule. <b>FY12:</b> Still waiting to coordinate with CV-this will be completed by July 2013.
5. Certify all Service Coordinators in Locus and ICAP assessments.	Done <b>FY11:</b> We are incorporating SIS in place of the ICAP and looking at developing a specialist position to perform the assessment region wide. <b>FY12:</b> County Social Services has certified expert SIS trainers to serve the region in place of the ICAP. The LOCUS training will be launched 1/9/2013 with Dr. Phlaum giving the training to all TCM and service coordinators. <b>FY13</b> Dr. Phlaum completed the training for LOCUS. SIS pilot project has evaluated over 450 individuals and County Social Services is positioned to compete for the standardized assessment RFP.
6. Provide 24/7 availability to the Help Center to coordinate after hour placements and service referrals.	We are not staffing beyond the workday but now have put the 24/7 cell phone number on the voice message. <b>FY11:</b> Beginning 1/1/2012 we will contract with Hawkeye Valley Area Agency on Aging, Aging and

	<p>Disability Resource Center to function as our front end Help Center.</p> <p><b>FY12:</b> We continue to work with HVAAA but we are not ready to integrate call centers at this time. We did establish a 800 number that can be routed to an on-call social worker and the County Social Services Administrator takes all after hour calls. We plan to become the back end of the AAA ADRC when they are ready.</p> <p><b>FY13</b> We continued meeting and now are ready to contract the full launch of LifeLongLinks as a one-call for the region if not for the entire state. We hope to engage all AAAs and all MHD Regions to make this operational.</p>
7. Create intake and resource referral packets. (1/1/2011)	<p>An intake packet and enrollment policy was adopted as a result of the state performance audit.</p> <p><b>FY11:</b> 1010 enrollment packets have been processed. Securing independent access to psychiatric evaluations and psych testing has been the biggest challenge.</p> <p><b>FY12:</b> This process is caught up and we are working on a standard Service Coordination manual.</p> <p><b>FY13:</b> We are using a Rapid Plan form that captures the complex needs of the clients we serve.</p>
8. Provide 1-800 capabilities to the help center.(1/1/2011)	<p><b>FY11:</b> ARDC does have an 800 #</p> <p><b>FY12:</b> We now have our own 800 number.</p> <p><b>FY13:</b> We have a website and 800 number for the region that is monitored 24/7.</p>
9. Establish video links to key access points. (7/1/2012)	<p>IT upgrades were made with this objective in mind.</p> <p><b>FY11:</b> Started Skype between offices. Will launch to IP units soon.</p> <p><b>FY12:</b> We placed a skype unit at Mercy medical but have not got buy in yet. We are using skype extensively between offices and making the regional platform much more effective.</p> <p><b>FY13:</b> We are upgrading to Linc but continue to use technology to improve access, production and integration of care.</p>

## Goal 2 Country View

By July 1, 2012 have Country View converted to a value added psychiatric nursing facility that will provide state-wide extended stay care for psychiatric patients that are at risk for MHI or hospital inpatient care.

### Progress

July 1, 2010 Country View moved out of Fund 10 and off the county budget into an "Enterprise Fund." The agency will now depend on service fees for their operating budget increasing the accountability and responsiveness to MHD service needs. Country View contracts with County Social Services for enhanced program services to meet the special needs of individuals with persistent mental illness and intellectual disabilities.

This is a significant time of transition for County View as the new governing board is hiring a permanent administrator as the interim administrator announced his resignation effective November 30, 2010.

The launch of the ICF/PMI unit is stalled by financial reporting concerns and Certificate of Need process.

Staff completed extensive retraining with 9 trained instructors of Crisis Prevention Institute that provide ongoing training and coordination of positive behavioral interventions. At least 20 staff have completed a 12 hour Mental Health First Aide Course, an on site instruction by Dr. Pomeranz was conducted on supporting individuals with disabilities.

**FY11:** Country View completed their first fiscal year as an Enterprise Fund. Due to MHD contracted services and enhanced occupancy they ended the year over \$300,000 in the black. They are moving forward with an ICF/PMI unit and will be instrumental in supporting the new Crisis Stabilization Unit opening on Campus 1/1/2012.

**FY12:** Country View now has a licensed ICF/PMI unit and continues to expand specialized programing for persistent mental illness and disabilities that is funding by County Social Services. Country View is sustaining financial viability and continues to provide the much needed capacity in the state to serve co-occurring individuals who have MH and significant medical needs. We have also greatly enhanced the transition process to the community using Service Coordination to connect individuals with community based services when they are ready.

**FY13:** Country View is now receiving enhanced reimbursement from IME for the ICF/PMI unit. We still struggle with IMD exclusion that prevents Medicaid reimbursement for primary psychiatric care.

### Goal 3 Mitchell County Care Facility

By January 1, 2010 have Mitchell County Care Facility fully covered by Medicaid reimbursed services. By June 30, 2013 transition Mitchell County Care Facility services to a community based delivery system.

#### Progress

1. HCBS/MR SCL implemented.(12/1/2008)	The program is in place and has been billed since May 2009.
2. Elderly waiver, CDAC billing approved. (1/1/2010)	With the HCBS SCL accreditation, they are ready to bill once they get IME approval.
3. Habilitation Services billing. (1/1/2010)	This has been pushed back but should be in place by 6/30/2011. <b>FY11:</b> Looking at 3/1/2012 as next target date. <b>FY12:</b> They just completed their first T19 audit and when they have completed all corrective action they will certify for Hab. Target date is now 3/1/2013. <b>FY13:</b> All of these targets have been missed with no commitment to a date certain. County Social Services will review the contract and consider making reimbursement contingent on this action.
4. Assess construction needs to transition out of the facility. (10/1/2009)	An architect was retained to help develop a facility plan. <b>FY11:</b> Conclusion was to only make short-term investments with a pay back of 5 years ie lighting, air conditioning, cosmetic improvements. Long-term will establish capital replacement fund. <b>FY13:</b> Met with Economic Development Director to identify investment opportunities to provide

	supported housing in the community to transition out of the facility by 7/1/2016.
5. Construct duplex for 24 hour care (6/30/2013)	The Supervisors were forced to upgrade the furnace and other upgrades so the transition to a new facility will be pushed back to recover the investment and allow the leadership to firm up the support programs.
6. Use MCCF for IP Step down assessment and return to home. (6/30/2013)	

#### Goal 4 Administrative Consolidation

By July 1, 2010 have converted to Community Services Network (CSN) and consolidated administrative support functions.

Action	Progress
1. Convert all counties to CSN. (7/1/2009)	<p>Conversion is wrapping up. A year behind schedule but we were able to time a complete transition of FY2011 financials onto the new system. We have archived the 5 separate dbases with full FY2010 data.</p> <p><b>FY11:</b> This was a great success in helping County Social Services to consolidate administrative functions and easily enroll new members. All financial reports were reported out of CSN for this year.</p>
2. Consolidate administrative functions in the most productive manner. (7/1/2010)	<p>Each member county has adopted specialized functions to support the effective implementation of County Social Services.</p> <p>This is a unique organizational structure. It remains flat and county-based but by leveraging technology, we have been able to specialize functions without centralizing personnel and offices.</p> <p><b>FY11:</b> We continue to increase our capacity while maintaining administrative costs below 2%. Each member builds their key resources to benefit the region.</p> <p><b>FY12:</b> Skype has allowed us to consolidate processes without consolidating our staff. We use a team leader format to complete key functions ie funding coordination, accounts payable, utilization review, service coordination, crisis stabilization etc.</p> <p><b>FY13:</b> Our administrative rate remains competitive but with the loss of Medicaid dollars it has doubled as a percentage of expenditures.</p>
3. Connect Black Hawk Jail medical contractor to the CSN to improve coordination of services. (10/1/2009)	<p><b>FY11:</b> We are now getting individual data on inmates receiving psych meds and will systematically offer access to medications for any inmate released until they are able to be seen by a designated MHC.</p>
4. Convert all paper archive files to electronic. 7/1/2013	<p><b>FY11:</b> Decided it was not cost effective at this time. We will maintain paper intake packets and building up our electronic records in CSN.</p> <p><b>FY12:</b> We are scanning to CSN those essential documents that we want to share with support teams but are not going to do any archive information.</p> <p><b>FY13:</b> We continue to scan documents to CSN as it makes sense. We are not scanning primary medical reports into CSN at this time.</p>



## Goal 5 Assessment Center/ Crisis Stabilization

By July 1, 2011 implement a regional outpatient assessment process for SA and MH civil commitments with the appropriate level/site of care available to meet the presenting need of individuals and avoid unnecessary hospitalization.

**FY112:** Beginning February 1, 2012 we launched the Adult Crisis Stabilization Center in Waterloo. In May of 2012 it was given pilot project status by legislatures with a report due December 15<sup>th</sup>. Moving forward we hope to see a partnership with Black Hawk Grundy MHC for pre-commitment screening. The ACSC is now connect to all the regional psychiatric units and will expand to connect our local hospitals.

**FY13:** In May of 2103 the legislature extended the pilot project for another year. It appears that accreditation will fall under Chapter 24 for Emergency Supported Community Living Standards. (See attached report for detail information)

### Action

### Progress

<p>1. The Mental Health Center will implement a consult clinic capable of assessing individuals taken into custody or ordered for an evaluation under Chapter 229 or 125. (1/1/2010)</p>	<p>We hope to see some progress from the awarded Crisis Stabilization grant targeted at this outcome.  <b>FY11:</b> A radical redesign plan was presented to the Mental Health Center of North Iowa and discarded in favor of an incremental approach to reform. The Magellan/DHS Crisis Stabilization grant failed to secure funding or initiate any significant programming. County Social Services decided to partner with North Iowa Juvenile Detention Center to use a vacated wing for crisis respite. This effort was led by Allen and Covenant Medical Centers.  <b>FY13:</b> We have started again with Pathways implementing a 24/7 mental health professional assessment program. This is being offered to all of our MHCs in the hopes of having a regional crisis intervention process in place by 7/1/2014. This is to be the new front door to replace medical emergency departments and unnecessary costs. We hope to launch pre commitment screening and explore 3.7 detox protocol.</p>
<p>2. Reorganize the hospital referee functions to support more outpatient assessments. (1/1/2010)</p>	<p>Meetings with the Judicial system appear to be resistive to change without legislative change.  <b>FY13:</b> The law was changed.</p>
<p>3. Request any legislative changes necessary. (3/1/2010)</p>	<p>Lost track of a group meeting to update Chapter 229. County Social Services will track and support legislation this cycle.</p>
<p>4. Develop RCF, ICF &amp; community alternative placements to inpatient (7/1/2011)</p>	<p>Progress is being made with the completion of a five year strategic plan for ID crisis, Country View ICF/PMI development and enhanced training through positive behavioral support intervention.  <b>FY11:</b> 1/1/2012 County Social Services will pilot a crisis stabilization unit at the NIJDC. Admission will be from the EDs and NIJDC will coordinate transportation.  <b>FY13:</b> This will be the primary focus of our strategic efforts going forward to increase community capacity and competency to provide alternatives to institutional work and living.</p>

## Goal 6 Standardized Assessments & Utilization Management

By June 30, 2013, have an assessment and utilization management program and process recognized by Iowa Medicaid Enterprise. The intended outcome is to contract with IME for the management of Medicaid disability services.

### Action

### Progress

1. Implement new service plan based on functional assessment and level of care. (7/1/2010)	We are just too tightly staffed to implement. We need at least 2 and preferably 3 additional service coordinators.
2. Review other state models; i.e. Ohio, Wisconsin, Washington. (7/1/2010)	<p>IME Director is supportive of the concept but would need to see something statewide to consider seriously.</p> <p>It is clear it would take too much time and effort to convince county action without the legislature giving direction.</p> <p><b>FY11:</b> Wright County is pulling their excellent work on the SIS tool into regional implementation once redesign passes.</p> <p><b>FY12:</b> This work continues.</p> <p><b>FY13:</b> We collaborated with the Central Region and NEI3A to complete an RFP to perform standardized assessments. The RFP was rescinded and an RFI issued for further discussions.</p>
3. Move to outcome based system. (7/1/2010)	Health Care Reform will generate attention to outcomes and away from encounter-based activities.

### Goal 7 IVRS Work Program

By June 30, 2011 implement a regional vocational initiative that leverages IVRS and Medicaid dollars to increase the productivity of individuals with disabilities.

**FY13** We could not secure the federal flexibility to deliver a support project to meet individuals ready and needing to work. Federal rules that require that the most severely disabled be given priority creates a bottleneck of resource for individuals at risk for a disability determination or those eager to work instead of receive assistance.

#### Action

#### Progress

1. Issue an RFP for regional work services. (10/1/2009)	We did not issue an RFP. We are doing a pilot with NIVC for bundled purchase of service with stated and tracked outcomes. <b>FY11</b> We continue to work on a progressive policy that will empower consumers and providers to make work a priority.
2. Track outcomes of the RFP (7/1/2011)	Outcomes are tracked quarterly and will be fully reported in next year's annual report. <b>FY11 Reporting for this fiscal year is included in the QA section of this report.</b>
3. Explore opportunity to leverage local dollars against IVRS. (7/1/2010)	IVRS has carved out the population they choose to provide work services. Medicaid is implementing UR and time limiting pre-voc. We need to see if we can leverage other Federal dollars with the few discretionary dollars we have left. <b>FY11</b> Our policy will look at ways to leverage existing county discretionary dollars to pull down federal dollars. <b>FY12:</b> Our collaboration was not able to get an exemption from the waiting list rules for IVRS which made the project to inflexible to implement. We were also only offered a 50 50 match which would not offer much economic incentive given the increased bureaucracy.

### Goal 8 Toledo Service Coordination

By July 1, 2010 leverage current county dollars spent on Toledo and shelter care into a more progressive response to children in need of mental health support.

**FY13:** Disability Rights Iowa complaint against the Department of Human Services resulted in a Iowa Juvenile Task Force recommending much needed changes that may displace the need for this initiative. County Social Services remains committed to serving children and providing alternatives for children with disabilities at risk of out of home placement.

#### Action

#### Progress

1. Add Toledo and shelter care to the Mental Health & Disability Services Plan (7/1/2009)	Done
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2. Establish intake and enrollment procedures with local shelters and Toledo.(7/1/2010)	<b>FY11</b> Having Tama County in the consortium will give us a platform to implement service coordination and transition planning for children admitted to Toledo.
3. Integrate the Service Coordination process to include children with Serious Emotional Disorders. (7/1/2010)	<p>We hope to have a program proposal to our member counties for implementation 7/1/2011.</p> <p><b>FY11</b> We continue to struggle with implementation and the concern of assuming more liability for MHD dollars.</p> <p><b>FY12</b> We will look at pulling Toledo under our member county departments to begin tracking.</p>

## **2. Documentation of stakeholder involvement;**

### **Website Launch**

We now have a website that contains agendas, minutes, program and contact information. This will continue to expand and be more interactive.

### **Stakeholder Meetings**

Once a month we have a rotating stakeholder meeting in one of our regional hubs. This is an opportunity to meet with clients, providers and other stakeholders.

### **County Board of Supervisors**

Local MHD decisions continue to be discussed and decided at the county level allowing for the most local control possible. .

### **County Social Services Governing Board Meeting**

The County Social Services Governing Board, made up of one Supervisor from each member county, meets the fourth Wednesday of each month. The Board distributes agendas to stakeholders and they publish minutes according to open meetings law. The Board rotates their meetings through each member county. Regular attendance and discussion with member county Board of Supervisors offers another opportunity to communicate with stakeholders. (Minutes are available upon request.)

### **Positive Behavioral Support Intervention Committee**

County Social Services leads a group of providers dedicated to developing the capacity, confidence and competence to serve our community members with severe interfering behavior. This group meets monthly following the County Social Services Board Meeting. It is an opening meeting. This group sponsored community wide training and awareness with Dr. Tom Pomeranz providing several days of training. These trainings are open to the public, individuals, collateral agencies and providers. (Minutes are available upon request.)

### **Mental Health Committee**

This is a group lead by Allen and Covenant Hospital to address the mental health needs of the community. This group included Supervisors, Law Enforcement, Sheriff and Police, Department of Corrections, Providers, Mental Health Center, Courts and Legislators. It was out of this group's work that launched the Crisis Stabilization Pilot Project.

### **Other Opportunities for Stakeholder Involvement**

County Social Services Staff attend occasional NAMI Meetings, legislative committees, provider forums, collaborative meetings with other agencies. County Social Services will conduct annual reviews with stakeholders in each member county to review this report and offer input into next years budget priorities. The Administrator regularly visits providers meeting with clients and soliciting ongoing feedback. *New County Social Services members have established advisory boards that continue to meet and provide input to the region.*

### 3. Current provider network;

A AVENUE PHARMACY	FRIENDSHIP CENTER	NAMI BLACK HAWK COUNTY
A-1 HOME HEALTHCARE CENTER	FULL CIRCLE SERVICES INC	NAMI of North Iowa
AAA Minnesota/Iowa	FULTZ, AARON	NANNINGA, JOHN
ABBE CENTER FOR COMMUNITY CARE	G & G LIVING CENTERS INC	NELSON AGENCY
Abbe Center for Community Mental Health	Gade, Emily	NELSON, CHARLENE
ABBOTT LAW OFFICE, P.C.	GALES LAW FIRM	Nelson, Christina
ABILITIES UNLIMITED INC	GALLAGHER, LANGLAS & GALLAGHER PC	NEW HOPE VILLAGE
ACCESS, INC.	GANGSEI, CHARLENE	NEW LIFE ESTATES
Actively Supporting Individuals with Challenges	GARLAND, PHILIP	NEXT GENERATION TECHNOLOGIES (NGT)
ADULT CRISIS STABILIZATION CENTER (ACSC)	Gary Shackelton	NIEBUHR, ABBY
Al's Corner Oil	GASKILL, DAVID	NISHNA PRODUCTIONS INC
ALAN N. WAPLES	GEFFE LAW OFFICE, Kent Geffe	NORTH IOWA AREA COUNCIL OF GOVERNMENTS (NIACOG)
Alco Discount Store 254	GENESIS DEVELOPMENT	NORTH IOWA TRANSITION CENTER (NITC)
ALLAMAKEE COUNTY AUDITOR	Genesis Health Group Physicians	NORTH IOWA VOCATIONAL CENTER (NIVC)
ALLAMAKEE COUNTY CASE MANAGEMENT	Genesis Medical Center	NORTH STAR COMMUNITY SERVICES
ALLAMAKEE COUNTY CPC ADMINISTRATOR	GENESIS MENTAL HEALTH ASSOCIATES, LLC	NORTHEAST IOWA BEHAVIORAL HEALTH, INC (NEIBH)
ALLAMAKEE COUNTY SHERIFF	Genesis Psychiatric Hospitalists Program	NORTHEAST IOWA COMMUNITY ACTION-TRANSIT
ALLE PROPERTIES	Genesis West	Northeast Iowa Family Counseling, LLC
ALLEN CLINIC PHARMACY	GERHARD, KRIS	NORTHEAST IOWA INTERPRETING SERVICE, INC.
ALLEN MEMORIAL HOSPITAL	GOLDEN CIRCLE BEHAVIORAL HEALTH CM	NORTHERN LIGHTS ALLIANCE FOR THE HOMELESS
ALLIANT ENERGY (UTILITIES)(PO BOX 3003)	Gonzalez Office Products (Point Nationwide)	NUCARA PHARMACY
ALLIANT ENERGY (UTILITIES)(PO BOX 3066)	GOODWILL INDUSTRIES OF CENTRAL IOWA	NW Iowa Youth Emergency Services Center
Allied Investments	GOODWILL INDUSTRIES OF NE IOWA	NYDLE, CHRISTOPHER M.
ALLISON PHARMACY	GOODWILL INDUSTRIES OF THE HEARTLAND	O'BRIEN COUNTY SHERIFF

ALTERNATIVE TREATMENT ASSOCIATES	Goshorn Psych Services PLLC	O'Brien, Christopher
AMBIKA, LLC (dba PARKVIEW MOTEL)	Greene Recorder	OFFICE ELEMENTS/ IOWA OFFICE SUPPLY, INC.
AMELIA MANAGEMENT	GREENVIEW TERRACE APARTMENTS	OLBERDING LAW OFFICE
AMERICA'S BEST VALUE INN	GREENWOOD DRUG	Olsen, Cindy
AMERICAN REALTY & MGMT CO	GREER LAW OFFICE	Olson, Brenda
Angel House	GREINER LAW OFFICE, P.C.	OMNITEL
Anliker, Dan	Griffin, Lucretia	OPPORTUNITY HOMES, INC.
Anliker, Renee	GROSS & MCPHAIL	OPPORTUNITY VILLAGE
Annette Martin	GRUNDY COUNTY AUDITOR	OPTIMAE LIFESERVICES, INC.
AREA PAYEE SERVICES	GUARDIAN ANGELS SERVICES LLC	OPTIONS OF LINN COUNTY
ARENDT AND LEE LAW OFFICE	GUNDERSEN HEALTH SYSTEMS- DECORAH CLINIC	OSAGE MUNICIPAL UTILITIES
Arne, Andrea	H.O.P.E, INC.	Osterhaus Pharmacy
ARONSEN, ROLF	Hallberg Law Office	PAETEC (Windstream)
ASAC (AREA SUBSTANCE ABUSE COUNCIL)	HAMILTON COUNTY SHERIFF	PAGE COUNTY SHERIFF
ASHLEY INN MOTEL	Hamilton County Social Services	PALMER LUTHERAN HEALTH CENTER
ASSOCIATES FOR BEHAVIORAL HEALTHCARE	Hamling Properties	PALO ALTO COUNTY SHERIFF
ASSOCIATES FOR PSYCHIATRIC SERVICES	HAMMER PHARMACY	PARK TOWERS APARTMENTS
Astrup Drug Smart Pharmacy	Hammer Simon & Jensen, Attorneys at Law	PARTNERSHIP FOR PROGRESS (AKA WILLOW HEIGHTS)
At Conference	HANCOCK COUNTY AUDITOR	PATHWAYS BEHAVIORAL SERVICES
AUTUMN PARK APARTMENTS	HANCOCK COUNTY SHERIFF	Patrick Byrne
Bailey, Travis	Handicapped Development Center (HDC)	PEHL, KRISTIN
BAKER, JOHNSON & SANDBLOM	HANSON APARTMENTS	PENN CENTER
Bartlett, Robert	HAPPEL, DAVID	PENN CENTER, INC.
BARTZ, HAROLD	HARDY, RUSSELL	PEOPLES CLINIC PHARMACY
BAUCH LAW OFFICE	HARMONY HOUSE HEALTH CARE CENTER	Peterson, Robert
BECKER RENTALS	Hart, Sandra	PHARMACY MATTERS
BEHAVIORAL HEALTH OPTIONS PLC	HARTIG DRUG	PHILIPS LIFELINE
BEHAVIORAL SERVICES LLC	HARTIG DRUG STORE	Pingel, James
BENNETT PHARMACY	Hartwood Inn	PIZZA RANCH OF CLARION

BENNETT, CRIMMINS & SMITH (OSTRANDER)	Harvey, Justin	PLAINS AREA MENTAL HEALTH CENTER (PAMHC)
BENTON COUNTY SHERIFF	HAUN-LARSEN RENTALS	PLEASANT HILL RESIDENTIAL
BENTON COUNTY SOCIAL SERVICES	HAWTHORNE HILLS APARTMENTS	POCAHONTAS COUNTY AUDITOR
BERRYHILL CENTER FOR MENTAL HEALTH	HEARTLAND INSURANCE RISK POOL	POCAHONTAS COUNTY CPC ADMINISTRATOR
Best Rest Inn and Suites	Heartland Power Cooperative	POCAHONTAS COUNTY PUBLIC HEALTH
BILL'S FAMILY FOODS	Heath, Charles	POCAHONTAS COUNTY SHERIFF
BLACK HAWK COUNTY AUDITOR	HEIKES, JANICE	Pogge, Cindy
BLACK HAWK COUNTY HEALTH DEPARTMENT	HILLCREST FAMILY SERVICES (ADMIN AND MAIN OFFICES)	POLK COUNTY AUDITOR
BLACK HAWK COUNTY MENTAL HEALTH & DISABILITY SVC	HILLCREST FAMILY SERVICES (DUBUQUE CMHC)	POLK COUNTY SHERIFF (ADMIN OFFICE)
BLACK HAWK COUNTY SHERIFF	HILLCREST FAMILY SERVICES (DUBUQUE RCF/RCF-PMI)	POLK COUNTY SHERIFF (BILLING)
BLACK HAWK-GRUNDY MENTAL HEALTH CENTER	HILLCREST FAMILY SERVICES (MAQUOKETA CMHC)	Poppema, Taylor
Black Hills Energy	HILLCREST FAMILY SERVICES (WASHINGTON COUNTY CMHC)	Postmaster
BLOEMKE PHARMACY	HILLCREST FAMILY SERVICES - HIGHLAND PLACE	POTTAWATTAMIE COUNTY SHERIFF
Bolinger, Dana	HIRTA Public Transport	POWESHIEK COUNTY MENTAL HEALTH CENTER (PCMHC)
Brandon L Edgington (Attorney)	HLA INVESTMENTS	POWESHIEK COUNTY SHERIFF
Brandon Neve (Landord)	HOFFMAN, JERRY	PRAIRIE VIEW MANAGEMENT INC
BREMER COUNTY SHERIFF	Hofmeyer & Hanson, P.C.	PRIDE GROUP, THE (FKA PLYMOUTH LIFE)
BRIDGEVIEW COMMUNITY MENTAL HEALTH	HOFMEYER III, JOHN W.	Print Shoppe Plus & Photography
BRIDGEWAY INC	Hoines Health Mart	PROGRESS INDUSTRIES
BRINGING EMPLOYMENT SERVICES TOGETHER (BEST)	HomeCare SERVICES, Inc.	Progressive
BRINK, DOUG	HOMESTEAD	PSYCHIATRIC ASSOCIATES OF NE IOWA
BROADLAWNS CAP CASE MANAGEMENT	HOPE HAVEN, INC	PSYCHIATRY, LEE & ASSOCIATES
BROADLAWNS MEDICAL CENTER	HORIZONS UNLIMITED OF PALO ALTO COUNTY	PURCHASE, TRACY
Brown Shoe Fit. CO (Formerly Hutzells)	HOTEL NORTHWOOD	Purk, Heidi
BUCHANAN COUNTY SHERIFF	Hotel Toledo	Qwest



BUENA VISTA COUNTY COMMUNITY SERVICES	HOWARD COUNTY AUDITOR	Ramsey-Kacena, Attorney at Law., Ellen
BUENA VISTA COUNTY SHERIFF	HOWARD COUNTY CASE MANAGEMENT	REGENCY TERRACE APARTMENTS
BUENA VISTA Treasurer	HOWARD COUNTY SHERIFF	REGION SIX PLANNING COMMISSION, PEOPLERIDES
BUILDERS OF HOPE	HUDSON LAW FIRM	Reindl Law Firm
BURLINGTON TRAILWAYS	HUFF COUNSELING SERVICES, L.L.C.	REM IOWA DEVELOPMENTAL SERVICES
BURROUGHS, BRANNON	HUMBOLDT COUNTY AUDITOR	REUTZEL PHARMACY
BUSKE, ERV	HUMBOLDT COUNTY COMMUNITY SERVICES	REYNOLDS & KENLINE L.L.P
BUTLER COUNTY AUDITOR	HUMBOLDT COUNTY SHERIFF	Richards, Allan Atty
BUTLER COUNTY COMMUNITY SERVICES	HW Housing	RICHMOND CENTER
BUTLER COUNTY RURAL ELECTRIC COOPERATIVE	Hy-Vee	Rick's Pharmacy
BUTLER COUNTY SHERIFF	Hy-Vee (Ressler Drug)	RICKERT LAW OFFICE
Cahalan, RACHEL	HY-VEE DRUG STORE	Ricoh USA, Inc.
CAM Property Holdings, LLC	HY-VEE DRUGSTORE	RISE LTD
CAPSTONE BEHAVIORAL HEALTHCARE, INC	HY-VEE PHARMACY	RITE PRICE OFFICE SUPPLY, INC.
Carr, Merle John	HY-VEE PHARMACY #1863	RODRIGUEZ, PAT
CARR, STEVEN	HY-VEE PHARMACY #1869	RON'S LP GAS SERVICE
CARROLL COUNTY SHERIFF	HY-VEE PHARMACY - McFarland Clinic	Rood Runner
CEDAR VALLEY COMMUNITY SUPPORT SERVICES (CVCSS)	HY-VEE STORE CHARGE ACCOUNTING	Russell, Bobbi
CEDAR VALLEY RANCH INC	HyVee	Rx Outreach
CENTER ASSOCIATES (CA)	HyVee Pharmacy	SAFE PLACE FOUNDATION THE
CENTRAL COMMUNITY HOSPITAL	INDEPENDENCE MENTAL HEALTH INSTITUTE	SALEM LIFESTYLES
Central Iowa Recovery (CIR)	INDIANOLA RESIDENTIAL	SCENIC ACRES
Century Link	INSTITUTE FOR THERAPY & PSYCHOLOGICAL SOLUTIONS	SCHAUDT, KARL
CERRO GORDO COUNTY AUDITOR	IOWA CHAPTER OF USPRA	SCHICKEL, CANDILA
CERRO GORDO COUNTY CASE MANAGEMENT	Iowa Communities Assurance Pool (ICAP)	SCHILLING LAW OFFICE, PC
CERRO GORDO COUNTY GENERAL RELIEF	Iowa Community Services Association	SCHONEMAN REALTORS
CERRO GORDO COUNTY PUBLIC HEALTH	IOWA EMPOWERMENT CONFERENCE	Schrandt, Eugene/Mary
CERRO GORDO COUNTY SHERIFF	Iowa Health (fka IOWA LUTHERAN HOSPITAL)	Schrock Properties, LLC

CERRO GORDO COUNTY TREASURER	IOWA HOME BASED SERVICES LLC	Schrock Rentals LLC
CHARLES CITY HOUSING	IOWA MOBILE HOME SERVICE	Schroeder (Payroll), Melanie
CHARLES KELLY LAW OFFICE, PC	IOWA NORTHLAND REGIONAL TRANSIT COMMISSION (RTC)	Schroeder, Melanie
CHATHAM OAKS INC	Iowa Specialty Hospital - Clarion	SCHUMAN, LISW, CINDY
CHEROKEE COUNTY SHERIFF	IOWA STATE ASSOCIATION OF COUNTIES (ISAC)	Scott County Sheriff
CHICKASAW COUNTY AUDITOR	IOWA VALLEY COMMUNITY COLLEGE CDC (IVCCD)	SCOTT PHARMACY
CHICKASAW COUNTY CPC ADMINISTRATOR	J & J Rentals	SEASONS CENTER FOR COMMUNITY MENTAL HEALTH
CHICKASAW COUNTY HOMEMAKER HOME HEALTH AGENCY	JACKSON COUNTY SHERIFF	SHAREINCARE LLC
CHICKASAW-MITCHELL COUNTY CASE MANAGEMENT	Jackson Management CO. Inc /West Side Manor	Shelby County Community Services
CHILDREN & FAMILIES OF IOWA	Jacobson, Bristol, Garrett & Swartz	Shell Express
CHRISTENSEN, JUDY	JAMES LOWN PROPERTIES LLC	Shopko
CHRISTIAN OPPORTUNITY CENTER	Janel Clarke	SHOPKO PHARMACY
Chyma Enterprise, Dan	JANSSEN, CARMEN	SHOPKO PHARMACY #52
CITY OF AMES	JDM Management	SILVER BOOT MOTEL
CITY OF CEDAR RAPIDS (AKA Cedar Rapids Transit)	Jeffries, Mary	SIOUXLAND MENTAL HEALTH CENTER (SMHC)
City of Clarksville	JENNIE EDMUNDSON HOSPITAL (Jennie Ed Behavioral)	SMITH , SHAWN
CITY OF FOREST CITY	JENSEN, VICKI	SMITH, ANGELA
CITY OF FREDERICKSBURG	JJAAS	SMITH, STEPHEN R
CITY OF LAWLER	JLL EXTENDED STAY IN	SOLUTIONS, INC.
CITY OF LELAND	Johnson & Bonzer, PLC	SORG SAMPLE MEDICAL PHARMACY
CITY OF MASON CITY	JOHNSON COUNTY MH/DS SERVICES	SOUTHEAST IOWA REGIONAL TRANSIT AUTHORITY (SEIBUS)
CITY OF MUSCATINE	JOHNSON COUNTY SHERIFF	SOUTHERN IOWA MENTAL HEALTH CENTER (SIMHC)
City of Nashua	JOHNSON LAW FIRM	SOUTHWEST IOWA PLANNING COUNCIL AKA TRANSIT(SWITA)
CITY OF NEW HAMPTON	JOHNSON LAW FIRM, P.C.	SPARRGROVE, DOMINIC
City Of Plymouth	JOHNSON PH.D, LORNE A	Specialty Underwriters LLC
CLARKSVILLE PHARMACY	Johnston, Caleb	SPENCER HOSPITAL
CLAY COUNTY SHERIFF	Juhl, Donald	SPETH, CORY

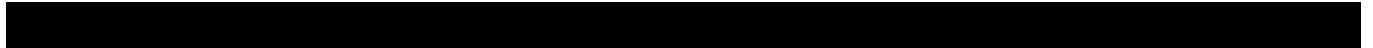
CLAYTON COUNTY SHERIFF	KATHLEEN'S CARE, INC.	SPRING HARBOR (LIBERTY SQUARE CARE CENTER)
Clayton, Sherry	KELLY, DIANA	ST COLETTA OF WISCONSIN, INC.
Clear Lake Pharmacy	KENT APARTMENTS	ST. ANTHONY REGIONAL HOSPITAL
CLEARY, FRANCIS	KIMBERLY S LANGE LAW OFFICE	ST. LUKE'S HOSPITAL - (HOSPITAL CHARGES)
CLEVELAND (GROSSNICKLE), (LINCOLN MENTAL HEALTH), KAY M.	Klemke, Mary	ST. LUKE'S HOSPITAL - (PHYSICIAN CHARGES)
Clingman's Pharmacy	KLEPPE PROPERTIES NO. TWO, LLC	STATE OF IOWA
COMMUNICATION SERVICE FOR THE DEAF (CSD OF IOWA)	Klimesh Motor Sales, Inc.	STEEGE PHARMACY
COMMUNITY BASED SERVICES OF BREMER COUNTY	Kmart Pharmacy	Storey Kenworthy
COMMUNITY CARE INC	KNOXVILLE RESIDENTIAL	Storey Kenworthy
Community Circle of Care	KNUDSON, KARL G.	STORY & SCHOEBERL, LLP
COMMUNITY HEALTH CENTER OF FORT DODGE	Kobliska, Vince	STORY COUNTY COMMUNITY LIFE PROGRAM
COMMUNITY MENTAL HEALTH CENTER FOR MID EASTERN IA	KOSSUTH COUNTY AUDITOR	STORY COUNTY COMMUNITY SERVICES
COMMUNITY NEURO REHAB	KOSSUTH COUNTY SHERIFF	STORY COUNTY SHERIFF
COMMUNITY PHARMACY	KOSSUTH REGIONAL HEALTH CENTER FAMILY PHARMACY (KR	STRAND LAW OFFICE
COMPREHENSIVE SYSTEMS INC	KRAMER & SCHILLER LAW OFFICE	STRAUB LAW FIRM
CONNECT AMERICA	KRISTIN L. DENNIGER, ATTORNEY AT LAW	STRAWHACKER AND ASSOCIATES
CONSUMER CREDIT COUNSELING (NORTHEAST IOWA)	KUHN , STEPHANIE	STUMME LAW OFFICE
Cornerstone Investments	LabCorp Iowa City	SUCCESSFUL LIVING
COUNTRY LIFE HEALTH CARE INC	LARRABEE CENTER, INC (TLC)	Sunset Village
COUNTRY VIEW CARE FACILITY (Countryview)	LARRY'S PHARMACY	SUNSHINE SERVICES, INC.
COUNTRY VIEW ESTATES	Larson, Brittany	SUSAN REBEDEAU, LISW
Country Winds Manor (fka Howard Residential Care)	Larson, Rick	SWIFT & SWIFT

COUNTY CASE MANAGEMENT SERVICES (ISAC) (CCMS)	Lavallee, Jeffrey	Systems Unlimited, Inc. (AKA Employment Systems)
COVENANT CLINIC PSYCHIATRY	LAVISTA APARTMENTS	TAILORED LIVING
COVENANT MEDICAL CENTER	Law Office of Charles S Lavorato	TAMA COUNTY AUDITOR
COX, DOUGLAS	LAWLER & SWANSON, P.L.C.	TAMA COUNTY CPC ADMINISTRATOR
COZY VAN	LEAHY, HAROLD V	TAMA COUNTY SHERIFF
CRAWFORD COUNTY SHERIFF	LEMUR PROPERTIES	Tama News Herald (Tama/Grundy Publishing)
Crawford, Sharon	LEVINE-MEYER, JUDY	TARGET
CREATIVE SERVICES - WE WORK	LIFE CONNECTIONS (Peer Support Training)	TASC, INC.
DAC INC	LIFE SKILLS TRAINING CENTER INC	TDC, LLC.
DAC INC - ANDREW JACKSON CARE	LIFELINE SYSTEMS CO (DBA PHILIPS LIFELINE)	THE DECORAH NEWSPAPERS
DAC INC-JULIEN CARE FACILITY, (No longer exists)	LIFEWORCS COMMUNITY SERVICES (NCSW, ICI)	THE PHOENIX GROUP
DALLAS INC (FKA Dallas County Care Facility)	LIGHTHOUSE PROFESSIONAL COUNSELING	THE SPECTRUM NETWORK
DANI L. EISENTRAGER	LINDA HIGGINS, ADVOCATE	THEIN THERAPY
DANIEL PHARMACY	LINDEMAN LAW	THOMPSON - ATTY., JOHN L.
Daniel, Steve	LINN COUNTY LIFT DEPT	Thrifty White pharmacy
DARRELL E. DAVIS ADULT DAY CENTER	LINN COUNTY MHDD/SCL Services	THUL LAW FIRM
Davis Psychological Services, PC	LINN COUNTY SHERIFF	TIMI JORDISON PSYCHOLOGICAL SERVICE, PC
DAYS INN	LITZEL, JERRY	TOM BERNATZ
DEAN AND ASSOCIATES	LOUGHLIN LAW FIRM	TOM'S FAMILY PHARMACY
DELAWARE COUNTY COMMUNITY SERVICES	LUCAS COUNTY HEALTH CENTER	Tommingo, Larry
DELAWARE COUNTY SHERIFF	LUEDTKE, DANIEL	Townsend, Willie E
DELAWARE, DUBUQUE, JACKSON CO RTA - MAQUOKETA	Lund Storage unit	Traer Star Clipper
DES MOINES AREA REGIONAL TRANSIT AUTHORITY	LUND, PHYLLIS	TRANS IOWA, L.C. (YELLOW CAB)
DES MOINES COUNTY COMMUNITY SERVICES	LUTHERAN FAMILY SERVICES	TREASURER, STATE OF IOWA
DES MOINES COUNTY SHERIFF	LUTHERAN SERVICES IN IOWA	TRETTIN, TODD
DHS - CASHIER	MACK, HANSEN, GADD, ARMSTRONG & BROWN P.C.	TRINITY HOUSE OF HOPE (DELETE)
DHS CASE MANAGEMENT UNIT	MAHASKA DRUG	TRINITY LIFE LINE

DIAMOND LIFE HEALTH CARE INC	MAHONEY, KATHRYN J.	TRINITY REGIONAL MEDICAL CENTER
DICKINSON COUNTY SHERIFF	MAKEE MANOR	TROY POWELL LAW FIRM
DISCO DRUG (PHARMACY CLOSED), DELETE	MALLARD VIEW, INC.	UNION DRUG INC
DISCOVERY LIVING	MANLY DRUG	UNIVERSITY OF IOWA
DODGE RENTALS	MARCY LUNDBERG LAW OFFICE	UNIVERSITY OF IOWA HOSPITALS AND CLINICS
Don's Pharmacy	MARION COUNTY SHERIFF	UNLIMITED SERVICES INC
DONLON PHARMACY	MARION ROETZEL	US CELLULAR
DUBUQUE COUNTY SHERIFF	MARK B. ANDERSON, P.C.	VAKULSKAS LAW FIRM
DUMONT TELEPHONE CO.	Mark Heard	VANDEN BOSCH, GARY
DUNCAN HEIGHTS INC	Mark L. Smith	Vera French Community Mental Health Center
EAGLE PHARMACY	MARSHALL COUNTY SHERIFF	VILLAGE NORTHWEST UNLIMITED
EAST CENTRAL IOWA ACUTE CARE	MARTIN HEALTH SERVICES	Virginia Wardell
EASTER SEALS SOCIETY, POLK COUNTY CENTER	Mary Blanchard (Landlord)	VISA
Eastern Iowa Properties LTD	MARY GREELEY MEDICAL CENTER	VISITING NURSES ASSOCIATION
ECHO PLUS INC	MARY J. EGAN	VOCATIONAL DEVELOPMENT CENTER (VODEC)
Eclipse News Review	Mary Madden	Vrzak, Jerry
EGGERT, ERB, FRYE, & MULCAHY PLC	MASON CITY CLINIC	WAHKONSA MANOR
EHRHARDT, GNAGY & MCCORKINDALE	MASON CITY PUBLIC UTILITIES	Walker, Mary Ann
ELBERG LAW OFFICE	MASON, DAVID J.	WALMART
ELECTRONIC TRANSACTION CLEARINGHOUSE (ISAC) (ETC)	MCCLINTOCK, GARY F.	WALMART
Ellsworth Municipal Hospital (AKA Freedom House)	MCCORKINDALE, STEVE	WALMART PHARMACY
ELSBERND PEST CONTROL	MC GEE, JUDY	WAPELLO COUNTY CPC ADMINISTRATOR
Elwood, O'Donohoe, Braun and White LLP	MCGREGOR PHARMACY	WAPELLO COUNTY SHERIFF
ELWOOD, O'DONOHUE, BRAUN, & WHITE	Meadow Lake Apartments	Wapsi Valley Family Counseling, LLC
Emerald Door Inn	MEDIACOM	WARNER, ALICE
EMH Physicians Clinic	MEDIAPOLIS CARE FACILITY INC.	WATERLOO WATER WORKS
EMMET COUNTY SHERIFF	MEDICAL ASSOCIATES CLINIC PC	WATNE, PAM

EMPLOYMENT FOR EVERYONE, LLC	MEDICAP PHARMACY	WEBBER, MELANIE
Engelhardt, LaRae	MEDICAP PHARMACY MARSHALLTOWN	WEBSTER COUNTY AUDITOR
ENGH RENTAL, INC.	MEDICAP PHARMACY-NEWTON	WEBSTER COUNTY COMMUNITY SERVICES
EVANS, MITCH	MENTAL HEALTH CENTER OF NORTH IOWA	WEBSTER COUNTY CPC ADMINISTRATOR
EVANSDALE SENIOR RESIDENCY	MENTAL HEALTH CLINIC OF TAMA COUNTY	WEBSTER COUNTY PUBLIC HEALTH
EVERGREEN ESTATES	MERCY FAMILY PHARMACY WESTSIDE	WEBSTER COUNTY SHERIFF
EXCEPTIONAL OPPORTUNITIES, INC.	MERCY HOSPITAL (aka Alegent)	Wedeking Sr., Joe
EXCEPTIONAL PERSONS INC. (EPI)	MERCY MEDICAL CENTER	WELAND CLINICAL LABORATORIES, P.C.
EYERLY BALL COMMUNITY MENTAL HEALTH SERVICES	MERCY MEDICAL CENTER - NORTH IOWA	WELLINGTON PLACE
FAMILY MANAGEMENT CREDIT COUNSELORS INC	MERCY MEDICAL CENTER/MERCY FAMILY COUNSELING	Welp Law Office, William Welp
FAMILY TREATMENT PROFESSIONALS	Mercy Specialty Clinic	WERDEN, MARK
Fareway	MET TRANSIT AUTHORITY OF BLACK HAWK COUNTY (METROP	WEST FORK SERVICES (HUMBOLDT WORKSHOP)
Farmers State Bank	MEYER, TAMMY	Westphal, Barb
FAYETTE COUNTY AUDITOR	MEYER PHARMACY	Williams, Dianne
FAYETTE COUNTY SHERIFF'S OFFICE	MHP BEHAVIORAL HEALTH	WILLIAMS, DONALD L
Fayette County Union	MID AMERICAN ENERGY	Williams, Kaysie
Fayette Publishing	Mid-American Publishing (AKA Butler Tribune)	Willie E. Townsend- Attorney at Law
Fayette Publishing-Elgin Echo	MID-IOWA AFFORDABLE HOUSING	WILLOW INN MOTEL
FEDERAL FIRE EQUIPMENT CO.	MIDAS COUNCIL OF GOVERNMENTS (DART)	WILSON, WILLIAM C.
FELDKAMP, HEATHER	MILLER COUNSELING SERVICES, LLC	Windstream
FIRST CALL TAXI & COURIER SERVICE	MITCHELL COUNTY AUDITOR	WINNEBAGO COUNTY AUDITOR
FIRST CHRISTIAN CHURCH	MITCHELL COUNTY CARE FACILITY	WINNEBAGO COUNTY PUBLIC HEALTH
FISCHER LAW FIRM	MITCHELL COUNTY HOME HEALTH CARE	WINNEBAGO COUNTY SHERIFF
Fitzgerald, Dennis	MITCHELL COUNTY SOCIAL SERVICES	WINNESHIEK COUNTY AUDITOR

FLANNERY, MARGE	MIW INC., MID IOWA WORKSHOP INC. (MIW)	Winneshiek County Engineer
FLOYD COUNTY AUDITOR	MMS LLC	WINNESHIEK COUNTY SHERIFF
FLOYD COUNTY PUBLIC HEALTH	Mohr, Linda	WINNESHIEK MEDICAL CENTER/DECORAH CLINIC
FLOYD COUNTY SHERIFF	MOORMAN, KARL	WINNGATE VILLAGE
FLOYD COUNTY TRANSIT	MOSAIC - WESTERN IOWA	WOODBURY COUNTY SHERIFF
FLURER, JENNIFER	MOSAIC IN NORTH CENTRAL IOWA	WORTH COUNTY AUDITOR
FORCIER, NINA	Moser Family Pharmacy	WORTH COUNTY PUBLIC HEALTH
FOREST CITY PARTNERS DBA TOWN SQUARE	MOSSMAN & MOSSMAN, LLP	WORTH COUNTY SHERIFF
FORT DODGE WATER DEPARTMENT	MOUNT PLEASANT MENTAL HEALTH INSTITUTE	WORTH MUTUAL INS. ASSOC.
FRANCIS LAUER YOUTH SERVICES	MT. VILLAGE APARTMENTS	WORTHAM-WHITE, ZORANA
FRANKLIN COUNTY SHERIFF	MUHLENBRUCH, KIM	WRIGHT COUNTY AUDITOR
Frascht, Mike	MUSCATINE COUNTY COMMUNITY SERVICES (MCCS)	WRIGHT COUNTY SOCIAL SERVICES
FRIENDS FOREVER SOCIAL EDUCATION CENTER	NACBHDD	WRIGHT COUNTY TRANSIT



#### 4. Actual expenditures for the fiscal year 2013

Account Description	MI	CMI	ID	DD	BI	TOTAL
Administration						\$1,372,806
Consultation	\$33,110					\$33,110
Public Education Services	\$8,985	\$2,627				\$11,612
Case Management - T19 Match		\$10,741	\$81,159	\$1,261		\$93,161
Case Management - 100% County		\$26,240	\$1,032	\$2,477		\$29,750
Services Management - Other	\$141,097	\$350,592	\$166,490	\$48,056	\$6,146	\$712,382
Transportation - General	\$17,338	\$69,441	\$248,576	\$24,553	\$68	\$359,975
Homemaker/Home Health Aid		\$28,820	\$8,355	\$1,560	\$375	\$39,110
Home Management Services		\$2,013	\$1,975			\$3,988
Respite		\$14,440	\$9,190	\$1,540	\$460	\$25,630
Guardian/Conservator	\$8,294	\$24,141	\$50,397	\$3,469		\$86,302
Representative Payee	\$18,674	\$89,702	\$50,631	\$7,700	\$610	\$167,316
Supported Community Living		\$1,000,359	\$322,944	\$335,247	\$25,185	\$1,683,735
Other Support Services		\$11,666	\$102,888			\$114,554
Rent Subsidy	\$32,700	\$101,420	\$7,731	\$790	\$224	\$142,866
Other Basic Needs	\$6,337	\$24,013	\$818	\$8,689	\$502	\$40,360
Outpatient Medical	\$70,489	\$21,390		\$537		\$92,416
Prescription Medicine/Vaccines	\$143,388	\$101,254		\$1,331		\$245,973
In-Home Nursing	\$6,913	\$13,237		\$1,425		\$21,575
Other		\$2,091				\$2,091
Acute & Emergency Treatment	\$213,428	\$126,383		\$1,509		\$341,320
Outpatient Mental Health	\$2,722,177	\$425,358	\$122	\$20,114		\$3,167,770
Social Support Services	\$237	\$39,479		\$3,474		\$43,190
Community Support Programs		\$480,430	\$30,735	\$17,698		\$528,863
Psychiatric Rehabilitation		\$61,563				\$61,563
Other Psychotherapeutic	\$435,815	\$279,435		\$401		\$715,651
Diagnostic Evaluations	\$14,478	\$2,015				\$16,492
Sheltered Workshop Services		\$90,103	\$644,233	\$115,277		\$849,614
Work Activity Services		\$57,774	\$742,881	\$31,726		\$832,381
Adult Day Care		\$2,084	\$14,692	\$10,452		\$27,228
Supported Employment Services		\$190,931	\$157,758	\$125,356	\$10,395	\$484,440
Enclave		\$10,875	\$13,157	\$33,773		\$57,804
Other Day Services		\$475,708	\$441,025	\$85,396	\$227	\$1,002,357
ICF/ID 1-5 Beds			\$21,958			\$21,958
Supported Community Living 1-5 Beds		\$85,222	\$663,210	\$171,319		\$919,751
Residential Care Facility 6+ Beds		\$3,922,962	\$542,176	\$104,897	\$21,144	\$4,591,180
RCF/ID 6+ Beds		\$38,734	\$41,423	\$89,616		\$169,773
RCF/PMI 6+ Beds		\$656,004	\$11,132			\$667,136
Nursing Facility		\$9,381				\$9,381
ICF/ID 6+ Beds			\$352,380			\$352,380
Supported Community Living 6+ Beds		\$2,780	\$5,229			\$8,010
Other Settings (6+ Beds)					\$25,389	\$25,389
State MHI Inpatient	\$110,994	\$710,540	\$75,518			\$897,052
State MHI Inpatient - Oakdale	\$29,958	\$12,841				\$42,798



State Resource Centers			\$45,082			\$45,082
Inpatient Hospitalization	\$584,235	\$338,897	\$5,876			\$929,008
Commitment - Diagnostic Evaluations	\$3,890	\$3,382	\$411			\$7,683
Commitment - Sheriff Transportation	\$69,237	\$42,978	\$3,444	\$283		\$115,941
Commitment - Legal Representation	\$50,663	\$40,435	\$3,394	\$1,064		\$95,555
Commitment - Other	\$33,239	\$30,495	\$957	\$2,270		\$66,962
Mental Health Advocate	\$95,527	\$181,397	\$9,956	\$2,742		\$289,622
<b>TOTAL COUNTY</b>	<b>\$4,851,203</b>	<b>\$10,212,371</b>	<b>\$4,878,937</b>	<b>\$1,256,003</b>	<b>\$90,726</b>	<b>\$22,662,046</b>

## 5. Scope of services provided through the fiscal year (do not include unused covered services);

The best report for scope of service is the unduplicated count of individuals served by county chart of account. Our current system does not properly identify all individuals with brain injury. Some are still included with the count of individuals with developmental disabilities:

### Unduplicated Count of Children Served by COA code & Disability Type

Date Prepared 11/22/2013 For COUNTY SOCIAL SERVICES FY:2013

Account	Code	MI	CMI	ID	DD	BI	Total
12489	Purchased Admin - Miscellaneous						1
22399	Services Management - Other	17	11	5	4		37
31354	Transportation - General	1	2	1			4
32326	Guardian/Conservator	1					1
32327	Representative Payee	1	1				2
32329	Supported Community Living		5	1	2		8
33345	Basic Needs - Ongoing Rent Subsidy	1	2				3
33399	Basic Needs - Other		1				1
41305	Physiological Treatment - Outpatient	10					10
41306	Prescription Medicine		1				1
42304	Acute & Emergency Treatment	6	1				7
42305	Outpatient Mental Health	76	3				79
42366	Social Support Services		5		1		6
42396	Community Support Programs			2			2
42399	Psychotherapeutic Treatment - Other	5					5
50368	\Supported Employment Services				2	1	3
50369	Voc/Day - Enclave				1		1
50399	Voc/Day - Other Services		1				1
63329	Supported Community Living (1-5 Beds)		1				1
64314	RCF (6+ Beds)		3		1		4
73319	Inpatient Hospitalization	3	1				4
74300	Commitment - Diagnostic Evaluations	2					2
74353	Commitment - Sheriff Transportation	59	2		2		63
74393	Commitment - Legal Representation	11	2				13
74399	Commitment - Other	2	2				4
75395	Mental Health Advocate - General	41	5	1			47

### Unduplicated Count of Adults Served by COA code & Disability Type

Date Prepared 11/22/2013 For COUNTY SOCIAL SERVICES FY:2013

Account	Code	MI	CMI	ID	DD	BI	Total
21374	Case Management - T19 Match	6	100	631	32		769
21375	Case Management - 100% County		17	2	5		24
22399	Services Management	641	816	219	120	25	1821
31354	Transportation	138	139	218	27	1	523
32320	Homemaker/Home Health Aid		18	3	1	1	23

32322	Home Management Services		7	9			16
32325	Respite		11	42	1	1	55
32326	Guardian/Conservator	21	60	256	9		346
32327	Representative Payee	29	152	75	14	2	272
32329	Supported Community Living		368	255	80	6	709
32399	Support Services - Other		45	72			117
33345	Ongoing Rent Subsidy	27	109	8	3	1	148
33399	Basic Needs - Other	17	43	2	8	2	72
41305	Physiological Treatment - Outpatient	529	134		8		671
41306	Prescription Medicine/Vaccines	788	304		9		1101
41307	In-Home Nursing	42	24		1		67
41399	Physiological Treatment - Other		10				10
42304	Acute & Emergency Treatment	163	71		2		236
42305	Outpatient Mental Health	4100	655	1	34		4790
42366	Social Support Services	2	71		9		82
42396	Community Support Programs		468	29	16		513
42397	Psychiatric Rehabilitation		12				12
42399	Psychotherapeutic Treatment - Other	577	79		2		658
43301	Evaluations non-Commitment	81	10				91
50360	Sheltered Workshop Services		28	131	27		186
50362	Work Activity Services		50	226	7		283
50367	Adult Day Care		2	11	3		16
50368	Supported Employment Services		87	100	47	3	237
50369	Voc/Day - Enclave		22	56	14		92
50399	Voc/Day - Other Services		79	202	13	1	295
63318	ICF/ID (1-5 Beds)			6			6
63329	Supported Community Living (1-5 Bed)		61	175	7		243
64314	RCF (6+ Beds)		306	41	5	1	353
64315	RCF/ID (6+ Beds)		3	3	4		10
64316	RCF/PMI (6+ Beds)		41	1			42
64317	Nursing Facility (6+ Beds)		1				1
64318	ICF/ID (6+ Beds)		1	47			48
64329	Supported Community Living (6+ Beds)		1	2			3
64399	Other Comm Based Settings (6+ Beds)					3	3
71319	State MHI Inpatient - Per diem charges	26	58	5			89
71399	State MHI Inpatient - Other (Oakdale)	3	3				6
72319	State Resource Centers			3			3
73319	Inpatient Hospitalization	262	105	2			369
74300	Commitment - Diagnostic Evaluations	14	12	2			28
74353	Commitment - Sheriff Transportation	295	187	16			498
74393	Commitment - Legal Representation	294	211	19	5		529
74399	Commitment - Other	52	38	3	3		96
75395	Mental Health Advocate - General	527	566	53	13		1159

## 6. Appeals, number, type, and resolution;

We had no appeals in FY2013.

## 7. Quality assurance implementation, findings and impact on plan, outcomes as captured by each program;

### Psychiatric Inpatient Analysis

County Social Services is surprisingly inline with hospital cost despite having four of the largest psychiatric units within the area and a service plan that reimburses for voluntary admissions. The average readmission rate was 15% with one hospital as low as 9% and the high at 18%: With the expansion the average cost per admission dropped 4%.

#### FY12 Private Psychiatric Hospitals in Region

Total Cost	\$602,425
Average Cost per Client	\$ 2,597

Total Clients 232

#### FY13 Private Psychiatric Hospitals in Region

Total Cost	\$878,378
Average Cost per Client	\$ 2,510

Total Clients 350

### State Mental Health Institutes

<i>Institutions</i>	<i>Admissions</i>	<i>Avg DayStay</i>	<i>Cost</i>
Cherokee	24	33	\$142,066
Clarinda	2	3	\$1,508
Independence	21	73	\$278,056
Mt Pleasant	8	25	\$52,859
Total	55	46	\$474,490
<i>Average Cost per Admission (about 20% of actual cost)</i>		<i>\$8,627</i>	

These charts drive the conclusion that Mental Health Institutes are not a lateral transfer from acute private psychiatric inpatient facilities but a transfer to an alternative level of care that allows a small population of chronically individuals to remain safe and receive the appropriate medication trials for their condition.

The economic pressure from managed care and the IMD exclusion make it difficult to pressure this treatment option. This pressure has the greatest impact on increased incarceration rates for

individuals with persistent and serious mental illness. Iowa averages 6.8 State Hospital residents per 100,000 population compared to the national average of 18.

State Hospitals no longer provide an effective institutional support for communities. Admissions are on a first come, first serve basis and have a 3-6 week waiting list due to limited beds. County Social Services advocates that redesign designate beds to each region. This would give our community the ability to triage individuals that they assess to be unsafe for community support.

## **Expansion of County Social Services Covered Lives**

County Social Services served 2844 more individuals or a 31% increase over last year. This was due primarily to joining with Chickasaw, Hancock, Howard, Humboldt, Kossuth, Pocahontas, Winnebago and Worth Counties in July 2012, Webster County in August 2012, Fayette County in October 2012 and Allamakee, Clayton and Winneshiek Counties in March 2013.

## **Administrative Quality Reviews**

The Finance Coordinator completed CSN record reviews with each designated Mental Health Center serving as access points. The review tightened co-payment determinations, identified needed data fields and cleaned records in preparation for ACA implementation.

Monthly the Funding Coordinator reviews snap shots of program data with the County Social Services Board. The Board is also presented with Exception to Policies for their review and compiled for future policy development.

## **Assessment of County Social Services use of Residential Facilities**

The redesign initiative brought attention to Iowa's heavy use of residential facilities to support individuals with intellectual disabilities. The statistics that TAC used in their report are misleading in that most facilities for individuals with disabilities in Iowa are 16 beds or less. The report makes a distinction between 7 to 15 beds and 16 and over. This puts most of Iowa's "group homes" into the higher bracket by just one bed. The other interesting observation is that Iowa's per person cost of \$39,220 is 44% below the national average of \$56,632. The shift to smaller settings will require a significant investment. Existing group homes may be modified to assisted living, duplex or apartment living settings.

Interestingly, the average spent per client per month for RCF support is close to the monthly rate charged for Active Community Treatment (\$1,100). The establishment of ACT teams in Mason City and Waterloo will be our primary initiative to reduce our dependence on residential care. The ACT teams will leverage the Crisis Recovery Center and Mental Health transport to get people the level of intervention most appropriate to their needs while staying in their community. Existing RCFs will be encouraged to evaluate downsizing to 16 beds to qualify for Medicaid reimbursement under the Habilitation program.

CSS supported the downsizing of two RCFs and continues to work and plan with others to preserve the important support these agencies provide to individuals in need.

## **Developing Multi-Occurring Competency**

County Social Services has engaged the support of Dr. Minkoff and Cline to develop the Principles of Comprehensive, Continuous, Integrated System of Care (CCISC). Dr. Minkoff spent a day with our team and key community providers to begin the strategic change process. Appointed representatives of CSS continue to attend and participate in ongoing support from the ICORN group.

## **New Member Annual Reports**

Due to the timing of this report and the fact that CSS grew last year 13 counties, we did not begin to incorporate all of the hard work identified in the individual member county Annual Report. The goals and focus of this report were initiated by the five original counties of County Social Services. The new strategic plan and management plan develop in 2014 will incorporate all of those initiatives not identified.

## **Community Reinvestment**

The most exciting opportunity of the regional structure is for the first time local communities are able to make reinvestments in programing and needs long identified but challenging to address with unpredictable revenue allocation. The following projects were funded in FY13:

- \$177,000 Reinvestment through Center Associates to establish sustainable quality mental health care to Tama County and the surrounding area.
- \$145,000 Investment in Telehealth Co-op through Pathways.
- \$54,000 Reorganization Grant to West Forks to sustain DD services in the Humboldt area.

## **8. Waiting list information**

Allamakee County had a Waiting List from 3/1/12 to 10/15/12

- Individual on wait list for sheltered work from 7/1-7/9/12. Was receiving HCBS Habilitation Services but wanted to work.
- Individual on wait list for transportation from 10/1-10/15/12.